24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)		PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)		FEC IDENTIFICATION NUMBER ▼
CREDO SUPERPAC		C C00507517
Check If Z 24-hour report 48-hour report New report Amends report filed on		
Full Name (Last, First, Middle Initial) of Payee Michael Eagle		Date
Mailing Address 22 Clover Lane		10
City State Wayne PA	Zip Code 19087	1593.75 Transaction ID : SE.11719
Purpose of Expenditure Payroll (Category/ Type	Office Sought: House State: PA Senate District: 08
Name of Federal Candidate Supported or Opposed by Expenditur MICHAEL G. FITZPATRICK		President Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		Other (specify)
Full Name (Last, First, Middle Initial) of Payee Julia Leonard	'	Date 10 23 2012
Mailing Address 1428 Alamo Avenue		Amount
City State Colorado Springs CO	Zip Code 80907	1125.00 Transaction ID : SE.11722
Payroll	Type	Office Sought: House State: PA Senate District: 08 President
Name of Federal Candidate Supported or Opposed by Expenditure MICHAEL G. FITZPATRICK		Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		2718.75
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
	nically Filed] Date	10 23 2012
Signature		